

Clerk of the House of Representatives
Legislative Resource Center
B-106 Cannon Building
Washington, DC 20515

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check One ☐ New Registrant ☒ New Client for Existing Registrant ☐ Amendment

(mm/dd/yyyy)

Check if this is an Amended Registration ☐ Yes ☐ No 1. Effective Date of Registration 4/1/2006

2. House Identification Number 35883 Senate Identification Number 6325-

REGISTRANT ☒ Organization ☐ Individual

3. Registrant name Organization Blank Rome Government Relations LLC

Address 600 New Hampshire Ave. Address2

City Washington State DC Zip 20037 Country USA

4. Principal place of business (if different than line 3)

City State Zip Country

5. Telephone number and contact name Prefix Full Name

Telephone (202)772-5803 Contact Ms. Rebecca South E-mail south@blankrome.com

6. General description of registrant's business or activities

Lobbying Firm

CLIENT A **Lobbying firm** is required to file a separate registration for each client. **Organizations employing in-house lobbyists** should check the box labeled "Self" and proceed to line 10. ☐ Self

7. Client name SAP America, Inc.

Address 3999 West Chester Pike

City Newtown Square State PA Zip 19073 Country USA

8. Principal place of business (if different than line 7)

City State Zip Country

9. General description of client's business or activities

Business software solutions

LOBBYISTS

[Go to page 3 to add more lobbyists >](#)

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

Name			Covered Official Position (if applicable)
First	Last	Suffix	
Heather	Podesta		
Ashley	Davis		
Al	Krachman		
Beth	Boehlert		
Melissa	Foxman		

Registrant Name Blank Rome Government Relations LLCClient Name SAP America, Inc.**LOBBYING ISSUES**

Find the code to select below.

[Go to page 3 to add more lobbying issues](#) >

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1.

GOV

12. Specific lobbying issues (current and anticipated)

Government relations consulting regarding business and financial software systems

DOD Appropriations

CFIUS

AFFILIATED ORGANIZATIONS[Go to page 3 to add more organizations](#) >13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period **and** in whole or in major part plans supervises or controls the registrant's lobbying activities?

No ⇒ Go to line 14.



Yes ⇒

Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal place of Business (city and state or country)
	Address C/S/Z/C	City State Country
	Address C/S/Z/C	City State Country
	Address C/S/Z/C	City State Country

FOREIGN ENTITIES[Go to page 3 to add more foreign entities](#) >

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?



No ⇒ Sign and date the registration.



Yes ⇒

Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage in client
	Street Address City State/Province Country	City State Country		%
		City State Country		%



Edit Form >

Form Complete >

Senate Password

File with Senate >

Signature Rebecca F SouthDigitally signed by Rebecca F South
DN: CN = Rebecca F South, C = US, O = DST ACES Business
Representative, OU = ACES-TrustID Business Certificate
Reason: I have reviewed this document
Date: 2006.08.11 11:38:20 -0400Date 8/11/2006Printed Name and Title Rebecca South, Government Relations Administrator